

01-19-01

PATENT

Total Pages \_\_\_\_\_

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
UTILITY PATENT APPLICATION TRANSMITTAL

1 NAMED INVENTOR OR APPLICATION IDENTIFIER: Markus Haller, Bozidar Ferek-Petric and Adrianus Donders  
TITLE: SYSTEM AND METHOD OF AUTOMATED INVOICING FOR COMMUNICATIONS BETWEEN AN IMPLANTABLE MEDICAL DEVICE AND  
A REMOTE COMPUTER SYSTEM OR HEALTH CARE PROVIDER

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and  
the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an  
envelope addressed to: Box Patent Application, Assistant Commissioner of Patents, Washington, D.C. 20231,  
"EXPRESS No EL752208827US, on this 18TH day of JANUARY, 2001.

FRAYDA M. NITSCHKE

Printed Name

Signature

Assistant Commissioner for Patents  
**BOX PATENT APPLICATION**  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

jc872 U.S. PRO  
09/765218  
01/18/01

- Sir:  
We are transmitting herewith the attached:
- Patent Application Transmittal  
 Specification:  
Total pages: 99 (including claims and abstract: Spec. 89 sheets; Claims 9 sheets; Abstract - 1)  
 Drawings:  
Total sheets: 22  
 formal       informal

Combined Declaration and Power of Attorney: **UNSIGNED**

- newly executed  
 copy from prior application  
 Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))  
 Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

Accompanying application parts:

- Notification of filing a  
 Assignment of the Invention to Medtronic, Inc.  
 Assignment cover sheet  
 Information Disclosure Statement  
 PTO Form 1449  
 Copies of IDS citations  
 Preliminary Amendment  
 A copy of the Petition or Conditional Petition for Extension of Time in the prior application.  
 Return Postcard

**IF A CONTINUING APPLICATION:**

- Continuation       Divisional       Continuation-in-part (CIP)  
of prior application No. 09/348,506.
- Amend the specification by inserting before the first line the sentence: This application is a  continuation  
 division       continuation in part  
of application number 09/348,506, filed July 7, 1999
- Cancel in this application original claims \_\_\_\_\_ of the prior application before calculating the filing fee.  
(At least the original independent claim must be retained for filing purposes.)
- The prior application is assigned of record to Medtronic, Inc.
- The Power of Attorney in the prior application is to: \_\_\_\_\_.

- X This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/176,499, filed JANUARY 18, 2000.
- X Address all future correspondence to: THOMAS F. WOODS, Reg. No. 36,726  
**Medtronic, Inc., MS 301**  
 7000 Central Avenue NE  
 Minneapolis, Minnesota 55432  
 phone: (763)514-6402

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	33	20	= 13	x 18	234
Independent Claims	6	3	= 3	x 80	240
Multiple Dependent Claims	NO			+ 270	0
Basic Filing Fee					710
				TOTAL	<b>1,184</b>

X Charge Deposit Account No. 13-2546 the sum of \$1,634.00 (Filing Fee) for a total of **\$1,184.00**.  
 X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546.. A duplicate of this transmittal is enclosed.

Date

1/18/01

Beth L. McMahon

BETH L. MCMAHON, Reg. No. 41,987  
 MEDTRONIC, INC.  
 7000 Central Avenue N.E.  
 Minneapolis, Minnesota 55432  
 Telephone: (763) 514-3066